

## Association of Connecticut Ambulance Providers

Aetna Ambulance -:- Ambulance Service of Manchester -:- American Ambulance Service Campion Ambulance Service -:- Hunter's Ambulance Service

## Testimony of John Zarrella, Aetna Ambulance Service & Ambulance Service of Manchester

HB 5030- AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2015.

Appropriations Subcommittee on Human Services, February 14, 2014

Senator Bye, Representative Walker, Representative Abercrombie and distinguished members of the Appropriations Human Services Subcommittee. My name is John Zarrella. I am a member and representative of the Association of Connecticut Ambulance Providers and the Assistant Director of Aetna Ambulance Service of Hartford and The Ambulance Service of Manchester, CT. I would like to offer testimony in support of restoring emergency ambulance transportation rates paid by the Department of Social Services.

Connecticut ambulance providers respond to all emergency medical calls without regard to one's healthcare coverage, as a result, many people who receive treatment and/or transport fail to pay. Ambulance services across our state have the statutory duty to respond to 911 calls for help in the communities we serve without regard to the patient's ability to pay. This duty includes factoring in all the costs associated with personnel, vehicles and equipment staffed in a pattern that most efficiently meets the call volume demand as determined by historical data.

Emergency ambulance rates for Medicaid were cut before Fiscal Year 2012 from a rate of \$218 to \$198 per trip. This continues to have an extremely detrimental impact on non-profit, for profit and municipal ambulance providers. It has been especially felt in ambulances serving urban communities where a higher percentage of Medicaid clients are served.

These massive cuts have severely strained ambulance providers throughout the state. At a time when costs continue to raise, ambulance revenues remain stagnant or in some cases have declined. Providers must pay higher fuel costs, insurance premiums and taxes, while trying to modernize emergency transportation service. Connecticut ambulance providers, within the last ten years have made critical advancements in the medical equipment, assessment and treatment protocols used by ambulance professionals. All of these advancements have enhanced the quality of care during emergency transport, but the costs are borne by ambulance providers stretching finances beyond reimbursement rates.

Additionally, while some providers service non-emergency transportation to cost shift, others especially in urban settings no longer find it profitable or do not have the resources to provide such services. Non-emergency rates have also been cut for the past three fiscal years, hampering the ability to cost shift. Unlike physicians' offices and other institutionalize health care facilities, ambulance providers do not have the option, nor would it be appropriate to ask the 911 caller questions related to the patient's insurance coverage or willingness and ability to pay for services, We therefore take on all emergency calls at risk.

Restoring the emergency ambulance rate to the 2010 pre-cut rate would be a great relief to all an	abulance
providers across the state.	

We thank you for your time and consideration in this matter.

Respectfully Submitted,

John Zarrella